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REPORTS

OF THE

ouncil.

(Dr. THEODORE GRAIG)

AND OF THE

Surveyor and Sanitary Inspector

(GLADSTONE BEATY, Assoc. R.S.I.)

ON THE

Health of the District in 1925.

MORPETH;

Printed by J. & J. S. Mackay, Bridge Street.

1926.

WEETSLADE URBAN DISTRICT COUNCIL.



REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1925.



TO THE CHAIRMAN AND MEMBERS OF THE WEETSLADE U.D.C.



GENTLEMEN,

I have the honour to present to you my report dealing with the Health and Sanitary Condition of your district during the year 1925.

By desire of the Ministry of Health, this Report will be in some degree a Survey Report dealing with the various improvements which have been brought about by the Urban District Council during the last five years.

Much has been done, but much remains to be done.

Roads.

The most marked improvement which strikes me is the much improved condition of your highways. Five years ago it was almost impossible to travel through the Weetslade district without commenting upon the extremely bad state of the roads; there was not one small stretch of road which did not contain bumps and pot-holes; to-day, with the exception of Sandy Lane and portions of the lane between Seaton Burn House and Seaton Burn, your roads compare very favourably with those in neighbouring districts, and, in many cases, leave very little to be desired.

The defects in the Seaton Burn Lane are largely attributable to the very heavy transport involved by your Seaton Burn Building Scheme, and, when that is completed, the road can be restored at a very moderate expense.

I should like again to draw your attention to the extremely bad state of Sandy Lane, which, although it is the southern boundary of your district, is in such a bad condition that no motorist who has had occasion to traverse it once, ever attempts to do so again.

During the last two years I have motored many thousand miles between the north of Perthshire and the South of London; but I regret to report that I have never encountered any part of a main road in worse condition.

I wish to put this matter before you in the strongest possible way, because I have no doubt that, if Sandy Lane were reconstructed, this road would afford a very excellent alternative route to Cramlington, Blyth, Ashington, Morpeth, and the North-East Coast generally, and the greater use of this road would react favourably upon the general trade of your district.

While the general condition of your main roads shows a very marked improvement during the past five years, I regret to state that the condition of many back streets and open spaces remains inexpressibly bad.

Railway Row, Annitsford, shines with an added lustre because it is practically the only piece of by-road construction attempted by you in the past five years, and even this good work is not used to full advantage owing to the fact that you have not yet been able to carry out my suggestion to remove the dilapidated cottage at the east end and make a paved road in from Front Street, Annitsford.

Railway Row presents a curious appearance as a nicely causewayed and paved street which can only be approached, except in very dry weather, through pools of mud and water at either end.

Among those back streets which stand sadly in need of your attention, I would like to mention specially:—

- (1) Clark Square, Annitsford.

Orange Street, Annitsford.

Front Barras Avenue, Annitsford; and the entire stretch of road leading from No. 80, Jubilee Terrace, Annitsford, past the ends of Jubilee Terrace, Jackson Street, Lee Street, round your new Housing Scheme to the Aged Miners' Homes and via Orange Street to the front.

- (2) Grieves' Row, Dudley.

Sinkers' Row, Dudley.

Miller's Yard, Dudley.

Wheatley Terrace, Dudley; and the lane between Councillor Simmons' residence and No. 1, Western Terrace, Dudley, which leads to the Big Club.

- (3) The Seaton Burn Coal Company have done and are still doing excellent work in improving the streets in their property. I hope they will continue the good work.

- (4) During the past winter I have had occasion to spend a good deal of time in Hazelrigg and Widcopen, and have good reason to realise the truth of the numerous complaints we have had from residents in those districts.

The lane to East Wideopen Farm is a mere cart track, and so is the lane to the Old Colliery, Wideopen, but, the state of Back South View and Alexandra Terrace, Hazelrigg, cannot be described in moderate language; it is simply terrible.

I trust that your Council will take immediate steps to have this awful mess cleared up and the road made fit for children to use.

In conclusion, I would like to say that it gives me no pleasure to make these damaging statements about your back streets, but I should fail in my duty as your Medical Officer if I did not put these matters before you in the strongest possible terms.

As long as Sandy Lane remains in its present dilapidated condition, you are losing a considerable proportion of the great benefit which you conferred upon the public by the reconstruction of Sandy Letch Bridge. I will conclude my remarks upon your highways by congratulating you upon the good work done there, not only in making the road safer for transport, but by removing a "bottle neck" you have probably helped to avert several tragedies.

The wall to the south-east of the old bridge was a favourite spot for children to hide behind and then to rush across the road in front of approaching traffic.

Housing.

During the past five years there has been a very marked improvement in the houses of the district both as to numbers and quality.

In 1921 there were 1493 inhabited houses in Weetslade district, and at the end of 1925 this number had increased to 1725.

In addition to your own scheme for 100 houses to the south of Dudley, the Burradon and Coxlodge Coal Company have erected the first 26 houses on a site where they hope to build a total of 250 houses as soon as revived conditions in the coal trade justify the expenditure.

The Northumberland and Durham Miners' Charities' Committee have also erected ten pleasant cottages in your district for the use of aged and infirm miners.

Private enterprise has entirely changed the appearance of the North Road between Wideopen and Seaton Burn by the erection of a large number of Bungalows, Villa Residences and Flatted Houses of superior type.

At the close of 1925 it was possible to see the beginning of your new Housing Schemes at Annitsford and Seaton Burn, and before the close of 1926 we expect to have 50 new houses occupied at Seaton Burn and nearly as many at Annitsford.

I am glad to note that you propose to build a further 50 houses to the east of Dudley, and I hope that you will not cease your efforts until you have made a good road between Dudley and Annitsford.

Sewage Disposal.

During the year 1925 you inaugurated a scheme for the complete transformation of your Sewage Disposal systems for Seaton Burn, Dudley and Annitsford. This work is very urgently needed, as your present system is more of a menace to the public health than it is a benefit.

I sincerely hope that the Ministry of Health will give you all the assistance in their power so that you may be enabled to carry out this important public work without further delay.

Infectious Diseases.

In past years we have had to rely on the kindness of neighbouring authorities to find accommodation for our infectious cases, and we are indebted to the Newburn and District Council, the Ashington Urban District Council, and, more recently, to the Newcastle Corporation for permitting us to send our cases to their Hospitals.

Under existing conditions, our population does not justify the erection of an Infectious Diseases Hospital for our own use, but I would like to recommend most strongly that you make definite arrangements with some neighbouring authority or authorities, so that your Medical Officer may be spared the necessity of making a personal appeal whenever it is necessary to find accommodation for an infectious case.

I wish to express my personal thanks to these neighbouring Medical Officers who have so kindly placed beds at my disposal during past years, but I would like to suggest to the Weetslade Urban District Council that it is not part of the official duties of their Medical Officer to go begging for beds when necessity arises for finding accommodation for infectious cases.

Meat Inspection.

During the past year, Mr. T. T. Bradford was appointed as Meat Inspector to the Weetslade Urban District Council.

The foregoing pages are an attempt to briefly recount past progress and present needs; the remainder of this report must necessarily be a re-statement of facts and figures which have already been brought to your notice in previous years with such additional details as are required to bring the report up to date.

NATURAL CONDITIONS OF THE DISTRICT.

The area of the Weetslade District is 2257·837 acres.

Population at the 1921 Census was 6,957 on 30th June, 1921.

The population at 30th June, 1925, as estimated by the Registrar-General, was 7,472, showing an increase of 67 since 30th June, 1924.

With the exception of Wideopen, Hazelrigg and High Weetslade, the district is very flat and low-lying, with the result that the provision of adequate sewage disposal for the most heavily populated parts of Weetslade is a very difficult matter.

During the last thirteen years the population has increased by nearly 800, and, with various schemes at present in hand, we may expect a still greater increase in the near future.

I would therefore again ask you to hasten your intended sewage scheme as much as possible.

Employment.

The great majority of the workers in the district are employed in the coal mining industry; the rest are in various business occupations, and a few are employed in agriculture.

Water Supply.

An ample supply of good water is obtained from the Newcastle and Gateshead Water Company, but there is no water laid on in the old houses of the district, which obtain their supply from stand-pipes in the road. This system entails much hardship on the occupants of the houses, and I would urgently present to your attention the desirability of having at least one tap laid on in every house. I am glad to note that in the new houses which have been built in accordance with the requirements of the Ministry of Health, water has been laid on and sanitary arrangements attended to. In addition to the water supply mentioned, there are four shallow wells in private use in the district.

Drainage and Sewerage.

Dudley and Annitsford: Drainage passes to Annitsford Irrigation Grounds. Seaton Burn: Drainage passes to Seaton Burn Irrigation Grounds. The Seaton burn receives the effluent from both grounds and is further contaminated by crude sewage

from Telfer's Buildings, Dudley, and Trewick's Buildings, Annitsford. Hazelrigg and Wideopen: The sewage is quite efficiently dealt with by means of a modern Sewage Disposal Works.

The Irrigation Grounds are not an efficient method of purification, the reason being that the low level of the ground delays the passage of the sewage by gravitation, and the subsoil of clay further acts as a dam. The result, therefore, is that there remains a large, sodden, germ-laden area in each district, and this is a constant menace to the health of the community, and would lead to serious disaster in the event of an outbreak of Typhoid Fever.

The danger is due to the fact that the conditions mentioned above prevent the process of permeation with precipitation, and subsequent oxidation of organic matter and germs, which is necessary for successful purification.

For these reasons, therefore, I venture to hope that the work of constructing a more modern and more hygienic system, which you are at present contemplating, will be expeditiously completed.

In this connection I desire to put upon record my firm conviction that a joint scheme for conveying sewage directly to the sea is infinitely preferable to any local method of dealing with sewage.

DISEASES PREVALENT IN THE DISTRICT.

Special mention must be made of the following:—

(1) The various forms of Catarrh of the upper air passages—Tonsillitis, Laryngitis, Bronchitis and Chronic Enlargement of the Tonsillar and Adenoid Tissues (especially in children).

(2) Asthma.

(3) Inflammation of the Eye—Conjunctivitis.

(4) Smallpox.

Conjunctivitis: Owing to the improvement of the roads and footpaths in the district, there has been a continued decrease in this disease during the past year, but under better conditions it should be almost eliminated, since it is due to preventable causes.

The remaining diseases mentioned, however, are still far too common, and at the same time their causes are more difficult to define, but I believe that they are chiefly due to the following conditions:—

(a) The present method of Sewage Disposal which favours the presence of germ-laden dust in the atmosphere.

(b) The inadequate drainage of certain footpaths, &c., which makes it practically impossible for those who use these roads and footpaths to remain dry-shod during bad weather.

(c) Overcrowding: In the majority of the older houses of the district, conditions are fairly satisfactory in this respect, since as a rule the house is occupied by one family, whereas, in the new buildings, sub-letting is favoured, and serious overcrowding has in many cases resulted.

(d) Inadequate Ventilation and Lighting.

The last factor is probably the most important. It cannot be too strongly stressed that the cause of Influenza and Colds is not fresh air, but that the real danger lies in the crowding together of many people in stuffy, ill-ventilated rooms where germs pass readily from one to another.

All the researches of modern science go to prove that Sunlight is essential to health.

So far as our present knowledge goes, we believe that the part of Sunlight that is most valuable to human life is the Ultra-Violet Rays, but, unfortunately, a considerable proportion of these life-giving rays is cut off when sunlight has to pass through glass windows and, accordingly, the necessity for open doors and windows is scientifically proved.

Sunlight is a natural "Disinfecter," and where the sun gets access, germs cannot thrive.

A natural paradox arises here and suggests the slogan—"Throw your windows wide open to keep out disease."

Smallpox.

During the year 1925, twenty-nine cases of Smallpox were notified in the Weetslade area.

In these days of almost unlimited means of transport, it has become increasingly difficult to trace the source of infection in cases of Smallpox, but I am strongly of opinion that, owing to the extremely mild character of the disease as at present manifested in this country, numbers of cases are not reported, with the regrettable result that on several occasions Smallpox has not been recognised until a second or even a third case has occurred in one family.

This means that cases of mild Smallpox have been allowed to go about, to mix freely with neighbours and even to attend Schools, Churches and Cinema Halls, with the result that numerous healthy persons have been infected with grave injury, to the general health of the country and enormous expense to local authorities.

In this connection it is permissible to mention the fact that it is apparently possible for persons to be infected by Smallpox, to infect others with Smallpox, and yet to show no apparent outward signs of the disease.

I wish to place upon record my strong personal conviction that Vaccination of all Contacts and isolation of all cases of Smallpox are the only effective methods of dealing with the disease.

Whatever may be the opinion of individual doctors, the general verdict of the medical profession is that the present epidemic is true Smallpox in a modified form, is preventable by vaccination and will continue to be a source of trouble and expense until all cases are treated with the same precautions as were successful in practically eradicating Oriental Smallpox from Great Britain. Vaccination with Calf Lymph manufactured and guaranteed pure by the Government Lymph department, is at the free disposal of the community, and I would strongly recommend all persons who have not been vaccinated during the last ten years to take an early opportunity of availing themselves of free service from the Public Vaccinators or from their private practitioners. If every person in Weetstone was vaccinated there would be no further cases of Smallpox, and a marked reduction in your expenses.

Closet Accommodation and Scavenging.

These matters are fully dealt with in the report of your Sanitary Inspector.

I would like to urge you in the strongest possible terms to do all in your power to have all the ashpits and privy middens in the district covered in as soon as possible. There are far too many streets in the district where ashes and refuse are scattered in all directions whenever we have a windy day.

I might add that the Medical Officer sent by the Ministry of Health to inspect your district was very unfavourably impressed by the state of many ashpits and privy middens.

Slaughter-houses.

There are now two licensed slaughter-houses in Seaton Burn and one in Dudley. All are in a sanitary condition.

Cowsheds and Dairies.

These have all been inspected and found efficient.

Workshops, &c.

There are four joiners' shops and two blacksmiths' shops in the district. All are in a sanitary condition. There are no factories and no "out-workers" in the district.

Schools.

All work in connection with Schools is under the control of the County M.O.H.

Housing.

The marked improvement in the housing of the district has already received favourable comment in my preliminary survey, and it only remains for me to congratulate the Council on the progressive attitude they have maintained in this important matter.

I have no hesitation in stating that until we have sufficient houses of suitable accommodation for our dense population, it will be quite impossible to attain to perfection in matters of public health.

It is no part of my duty to preach sermons, but it is an obvious fact that, if a man has not a decent house to live in, he will necessarily spend his leisure time elsewhere, sometimes to the real detriment of his health and pocket.

Even in the short time I have lived among you I have seen most wonderful improvement—moral and physical—which I think can fairly be attributed to improved domestic surroundings.

Go on with the good work, Gentlemen.

There are still far too many overcrowded homes in this district, too many families compelled to live and move and have their being in one small room, too many houses where the only means of access to fresh air is by the one and only door, and it is only at the door that the air is fresh.

We all realise that the depression in the coal trade has made it difficult, if not financially impossible, for Coal Companies to make necessary improvements in their properties, but we hope that when times are better all this work will be done.

Many houses have leaky roofs, damp walls, damp and uneven stone floors, windows that cannot be opened, defective grates and ovens, and a myriad other defects that make your Medical Officer thankful that he is not a miner's wife.

The statistics with regard to housing will be found in the appendix, where they can be dealt with more concisely and efficiently.

Sanitary Administration.

A statement of the work done by your Inspector of Nuisances is appended.

Infectious Diseases.

Apart from Smallpox, there has been no serious outbreak of Infectious Disease in the Weetslade area during 1925.

There were six cases of Scarlet Fever reported in Dudley, and seven in Wideopen and Hazelrigg.

Immediate steps were taken by your Sanitary Authorities to prevent further spread of the disease, with satisfactory results.

Three cases of Diphtheria occurred in one house in Dudley; they were all immediately removed to hospital, and no further cases occurred.

A tabular statement of Infectious Diseases is appended.

Taking into consideration the impoverished condition of the majority of the people in the Weetslade area during 1925, I think that we are to be congratulated upon the comparative rarity of Infectious Diseases in the district during that period.

I have already referred to the Smallpox Epidemic in my remarks upon diseases prevalent in the area.

Tuberculosis.

There is a definite increase in the number of cases of Tuberculosis reported during 1925, and the fact that the increase is mainly in those forms of the disease affecting other parts of the body than the lungs, may be largely attributed to the poverty of the district during 1925 owing to the stoppage of work in many of the mines here.

I have given much thought to the prevention and cure of Tuberculosis during the last twenty years, and have come to the definite conclusion that, until the working classes obtain much improved housing conditions, no other form of Government intervention can have much effect in wiping out the White Plague.

Sanatorium treatment is undoubtedly ideal, but, alas, it is only available for a relatively small number of cases, and I have had the unhappy experience of seeing more than one patient succumb to this dire disease before I was able to obtain Sanatorium accommodation for him.

In the County of Northumberland one is extremely fortunate if one obtains a bed for a Tuberculosis patient within six months of the official notification of the disease, and, during that six months, in too many cases, the disease has become too far advanced to give the Sanatorium authorities even a reasonable chance to effect a cure.

On the other hand, even if the patient should receive effective treatment in time to stop the ravages of the disease, it is impossible to proclaim that he is definitely cured; he returns, perforce, to his old more or less insanitary conditions of life, and, sad to say, in very many cases relapses within a relatively short time.

In this connection I would like to put in a plea for the Woolley Settlement, where, solely by voluntary efforts on the part of patients and interested friends, a number of "Cured" Consumptives are now living in ideal sanitary surroundings, and, moreover, supporting themselves in various suitable occupations such as Rabbit Farming, Pig Breeding, &c.

In the development of the Settlement System and in the provision of better houses for the working classes, lies, in my opinion, the main solution of the Tuberculosis problem.

The ideal is to provide immediate sanatorium accommodation for every case of Tuberculosis as soon as it is recognised, but, in the present financial condition of this country, this is utterly impossible.

One other condition has yet to be considered, and that is to overcome the natural objection of many tubercular patients—and their friends—to leaving home and relations and going away to a more or less remote spot where, apart from the staff, their only associates are also victims of the dread disease.

I am happy to state that, once the patient has actually gone to a sanatorium, very few desire to leave until their cure is completed. This is a very high testimonial to the kindness and efficiency of the Sanatorium Staff.

Vital Statistics.

There were 191 births registered in 1925,—114 males and 77 females. Of these, two males and one female were illegitimate.

The Birth-rate was 24.43. No illegitimate child died.

Total Deaths were 92,—44 males and 48 females, giving a Death-rate of 12.31.

I much regret to report a serious increase in the Death-rate among infants under twelve months, but this can be explained in some degree by the impoverished condition of the district and by the fact that the majority of these children were congenitally debilitated.

There were a quite unusual number of premature twins born during 1925, and, in an ordinary way, one expects a heavy mortality among twins.

Practically all these deaths among infants occurred in the first few days of life, and, in my opinion, none of them were preventable even under prosperous conditions.

Only one woman died in consequence of Child-birth, and in this case, which did not occur in my own practice, I know that every possible means was tried to save the woman concerned.

The full figures regarding the causes of all deaths will be found in the Appendix.

I very much regret that in this survey report it appears to be quite impossible to avoid referring to various matters more than once, and I can only ask you to pardon me if, in my anxiety to omit nothing of importance, I have trespassed upon your time and patience to too great a degree.

I fully recognise that you have been, and are now working again superhuman difficulties, but I am sure you will prove yourselves capable of superhuman efforts to overcome those difficulties.

Your greatest handicap is want of money, but even this can be counter-balanced by a continuance of the notable zeal with which you are tackling the problems of 1926, which I will again summarise:—

- (1) A thoroughly modernised Sewage Disposal System.
- (2) More and better Houses.
- (3) Improved Highways, Back Streets and Open Spaces.
- (4) A through road to Annitsford.
- (5) Adequate Hospital Accommodation for Infectious Cases.
- (6) A Local Cemetery.

I have the honour to remain, Gentlemen,

Your Obedient Servant,

THEODORE CRAIG,

M.B., Ch.B. ; F.R.S.M.E., &c.

Dudley, Northumberland.

April, 1926.

APPENDIX.

1. General Statistics.

Area,—2257.837 acres.

Population as estimated at June 30th, 1925, 7,472.

Number of Inhabited Houses (1921), 1493; (1925), 1725.

Number of Families or Separate Occupiers (estimated), 1963.

Rateable Value (1925), £30,066 - 10 - 0.

Sum represented by a penny rate, £103.

2. Vital Statistics.

Total Births, 191. Males 114, Females 77.

Illegitimate Births, Males 2, Females 1.

Birth-rate, 24.43 per 1,000.

Total Deaths, 92. Males 44, Females 48.

Death-rate, 12.31 per 1000.

Illegitimate Death-rate, Nil.

Infantile Mortality.—Twenty-three Infants died before attaining the age of one year. This is an increase of five over 1924, and gives us the unsatisfactory Infantile Death-rate of 122.34 per 1,000 births, although this is better than the rate of 164.5 recorded in 1921.

3. Notifiable Diseases Reported during 1925.

DISEASE.	Annitsford.	Seaton Burn.	Wideopen. and Hazelrigg	Dudley.	Total.
Pneumonia	0	3	0	2	5
Smallpox	5	2	1	21	29
Scarlet Fever	0	0	7	6	13
Diphtheria	0	0	0	3	3
Erysipelas	0	0	1	3	4
Ophthalmia Neo-Natorum ..	0	0	0	1	1
Malaria	0	0	0	1	1
Pulmonary Tuberculosis	2	1	1	4	8
Non-pulmonary Tuberculosis	1	3	3	2	9

4. Causes of Sickness.

These have been dealt with at length in a previous page, and may be summarised:—

Defective Sewage Disposal Works.

Insanitary Houses

Overcrowding.

5. Nursing Arrangements, Hospitals, &c.

The general nursing of the district is done by two extremely capable District Nurses under the auspices of excellent District Associations.

The Dudley War Memorial Hospital and Nurses' Home contains three beds for the reception of emergency cases.

Infant Welfare Work is done by a Health Visitor under the Northumberland County Council.

No provision is made locally for the nursing of Infectious Cases at home.

Midwives.—Practically all the Midwifery in the district is done by the two District Nurses under the direct supervision of the local Medical Practitioners.

One registered Midwife in Dudley attends an occasional case.

Clinical and Treatment Centres.—As the great majority of people in this district come under the National Health Insurance Act or under some form of Contract Practice, no such schemes are necessary, and none exist.

Hospitals.—Patients requiring hospital treatment are usually admitted to one or other of the Hospitals in Newcastle-on-Tyne.

Infectious Cases are treated in a Joint Infectious Diseases Isolation Hospital at Newburn-on-Tyne by special arrangement.

Tuberculosis Cases are admitted to various Sanatoria under the control of the Northumberland County Council.

The Weetslade Urban District Council have no definite arrangements for the Isolation of Smallpox cases. During 1925 our cases were treated at the Ashington Smallpox Hospital, and latterly they have been admitted to the Gosforth Smallpox Hospital by favour of Newcastle Corporation.

Ambulance Facilities.—Ambulances are provided by the local Coal Companies for the use of their employees and their dependents. Weetslade Council have also an arrangement with Gosforth U.D.C. who provide the use of their ambulance when required.

Infectious Cases are removed in the Fever Hospital Ambulance.

6. Laboratory Work.

This is done at the School of Medicine, Newcastle, under the County Council Scheme.

Diphtheria Anti-toxin is issued free by the Council under the supervision of the M.O.H.

7. Sanitary Administration.

Any matters not referred to in previous pages will be fully dealt with in the attached report of your Sanitary Inspector.

8. Public Health Staff.

Medical Officer of Health (part-time); Inspector of Nuisances; Inspector of Meat.

9. Housing.

Number of New Houses erected during the year, 51.

10. Adopted Acts.

Public Health Acts Amendment Act, 1890 (Part III), Public Health Acts Amendment Act, 1907 (Part II., Part III (except Sections 39 to 42 inclusive), and Part IV. (except Section 67), Infectious Diseases Prevention Act, 1890), Private Street Works Act, 1892.

1. Unfit Dwelling-Houses.

INSPECTION: (1) Total Number of Dwelling-houses inspected for Housing Defects (under Public Health and Housing Acts	273
(2) Number of Dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	18
(3) Number of Dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for habitation	Nil.
(4) Number of Dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	150

2. Remedy of Defects without Service of Formal Notices.

Number of Defective Dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	72
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3. Action under Statutory Powers.

A.—PROCEEDINGS UNDER SECTION 28 of the HOUSING, TOWN PLANNING, &c., ACT, 1919.

- | | | | |
|-----|--|--------|------|
| (1) | Number of Dwellings in respect of which notices were served requiring repairs | | 16 |
| (2) | Number of Dwelling-houses which were rendered fit | | |
| | (a) by owners | | 14 |
| | (b) Local Authority in default of owners | ... | Nil. |
| (3) | Number of Dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close | | Nil. |

B.—PROCEEDINGS UNDER PUBLIC HEALTH ACTS.

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|-----|--|--------|------|
| (1) | Number of Dwelling-houses in respect of which notices were served requiring defects to be remedied | | 104 |
| (2) | Number of Dwelling - houses in which defects were remedied :— | | |
| | (a) by owners | | 49 |
| | (b) by Local Authority in default of owners | ... | Nil. |
| | (c) being dealt with | | 39 |

C.—PROCEEDINGS UNDER SECTIONS 17 and 18 of the HOUSING, TOWN PLANNING, &c., ACT, 1909.

- | | | | |
|-----|--|--------|------|
| (1) | Number of representations made with a view to the making of Closing Orders | | Nil. |
| (2) | Number of Dwelling-houses in respect of which Closing Orders were made | | Nil. |
| (3) | Number of Dwelling-houses in respect of which Closing Orders were determined, the dwelling - houses having been rendered fit | | Nil. |
| (4) | Number of Dwelling-houses in respect of which Demolition Orders were made | | Nil. |
| (5) | Number of Dwelling-houses demolished in pursuance of Demolition Orders | | Nil. |

Table I.
VITAL STATISTICS.

Year.	Estimated Population for Birth Rate.	Estimated Population for Death Rate.	Births.		Deaths. Under 1 year of age.		Deaths. At all ages.	
			Number.	Rate.	Number.	Rate per 1000 Nett Births.	Number.	Rate.
1919	6924	6647	173	24.90	21	121.3	108	16.20
1920	6912	6912	244	35.30	24	98.36	88	12.73
1921	7080	7080	211	30.12	33	164.5	102	14.50
1922	7108	7108	186	26.90	19	97.26	100	13.92
1923	7216	7216	204	28.27	21	102.93	99	13.72
1924	7405	7405	214	28.89	18	84.11	86	11.61
1925	7472	7472	191	24.43	23	122.3	92	12.31

TABLE II.—**Birth-rate, Death-rate, and Analysis of Mortality** during the Year 1925.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1925, while those for the towns have been calculated on populations estimated to the middle of 1924. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

	BIRTH-RATE PER 1,000 TOTAL POPULATION.	ANNUAL DEATH-RATE PER 1,000 POPULATION.										RATE PER 1,000 BIRTHS		PERCENTAGE OF TOTAL DEATHS.	
		All Causes.	Enteric Fever.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under 2 Years.)	Total Deaths under One Year.	Causes of Death certified by Registered Medical Practitioners	Inquest Cases.	Uncertified Causes of Death.
England and Wales	18.3	12.2	0.01	0.00	0.13	0.03	0.15	0.07	0.32	0.47	8.4	75	92.1	6.9	1.0
105 County Boroughs and Great Towns, including London	18.8	12.2	0.01	0.00	0.17	0.03	0.18	0.09	0.30	0.43	10.8	79	92.1	7.3	0.6
157 Smaller Towns (1921 Adjusted Populations 20,000-50,000.)	18.3	11.2	0.01	0.00	0.15	0.02	0.14	0.06	0.31	0.38	7.6	74	93.0	5.9	1.1
London	18.0	11.7	0.01	0.00	0.08	0.02	0.19	0.11	0.23	0.46	10.6	67	91.1	8.9	0.0
WEETSLADE	24.43	12.31	.00	.00	0.27	.00	.00	.00	.27	.27	.27	122.3	97.4	2.6	0.0

TABLE III.

CIVILIANS ONLY.

CAUSES OF DEATH IN 48-35.

WEETSLADE U.D., 1925,

Causes of Death.	M	F
All Causes.	44	48
1 Enteric Fever		
2 Smallpox		
3 Measles	1	1
4 Scarlet Fever		
5 Whooping Cough		
6 Diphtheria... ..		
7 Influenza	1	1
8 Encephalitis Lethargica		
9 Meningococcal Meningitis		
10 Tuberculosis of Respiratory System	3	1
11 Other Tuberculous Diseases	1	1
12 Cancer, malignant disease	3	6
13 Rheumatic Fever		
14 Diabetes		
15 Cerebral Hæmorrhage, &c.		2
16 Heart Disease	4	3
17 Arterio-sclerosis	3	1
18 Bronchitis... ..	2	7
19 Pneumonia (all forms)	2	3
20 Other Respiratory Diseases		1
21 Ulcer of Stomach or Duodenum		
22 Diarrhoea, &c. (under 2 years).	1	1
23 Appendicitis and Typhlitis		
24 Cirrhosis of Liver... ..		
25 Acute and Chronic Nephritis... ..	2	4
26 Puerperal Sepsis		
27 Other Accidents and Diseases of Pregnancy and Par- turation		1
28 Congenital Debility and Mal- formation, Premature Birth	7	8
29 Suicide... ..		
30 Other Deaths from Violence	1	1
31 Other defined Diseases	13	6
32 Causes ill-defined or unknown		

WEETSLADE URBAN DISTRICT COUNCIL.



ANNUAL REPORT OF SURVEYOR and SANSITARY INSPECTOR.



TO THE CHAIRMAN AND MEMBERS OF THE
WEETSLADE URBAN DISTRICT COUNCIL.

GENTLEMEN,—

I beg to submit to you my Annual Report for the year ending December 31st, 1925 :

New Buildings.—With the exception of the Aged Miners' Cottages at Dudley and the Council Housing Scheme at Annitsford, building developments are confined to the west side of the district, and of the 51 houses completed during the year only the ten Aged Miners' Cottages can rank as "Working Class Houses."

While the present building costs hold good, it is undoubtedly impossible to erect working-class houses to rent at economic rents to compare with similar houses of pre-war days, and I stand firm to my opinion that the big curse of this district, overcrowding, will never be removed by private enterprise, the only solution being the erection of more and more houses by the Council.

It is pleasing to be able to place on record that the Council's Building Schemes under the 1924 Housing Act were commenced during the year, although the benefit of these will not be obtained until next year.

Private Street Works Act, 1892. — I regret that the ever-increasing duties in my department have necessitated the neglect of the Private Street Works Act, with the result that a blank report is presented, and many insanitary eyesores remain. I can only hope that the arrangements made early in 1926 to give me assistance for this specific work may result in a more satisfactory year during 1926.

The Scheme of the Seaton Burn Coal Company for roads, footpaths, and back yard paving has without doubt been held up on account of the critical crisis which the mining industry has been, and is passing through.

The benefit of insisting upon good specifications for new roads on building estates is very evident at Wideopen, on the Woodlands Park Estate. Here we have most excellent roads in formation which, when completed, will be a credit to the district.

Sewage Disposal.—The Sewage Works at Wideopen continue to deal with the sewage of that area with satisfactory results. It is my opinion that if building operations continue at the present rate in the Wideopen area, these works will prove to be inadequate in a few years.

In connection with the Seaton Burn and Annitsford Irrigation Grounds, I repeat my remarks of last year. These works are condemned by the Ministry of Health, the County Council, and the Weetslade Council admit that they are hopelessly out of date and unsatisfactory, and during the past year have been busily engaged on schemes to abolish these nuisances.

Scavenging.—The Scavenging of the district is carried out by direct labour, and has been satisfactory.

The average cost per house for the district was 13·51 shillings, comparing very favourably with the previous year at 14·44 shillings.

Lighting. — Six new lamps were erected during the year, making a total of 209 in the district, all of which, with the exception of two are lighted by gas supplied by the Newcastle and Gateshead Gas Company.

Street lighting is without doubt very satisfactory, the costs during the season being:—

	£	s.	d.		£	s.	d.
Cost of Gas	166	18	9	Cost per lamp ...	0	15	11½
Cost of Maintenance ...	102	17	0	„ „ „ ...	0	9	10
Cost of Labour	166	16	11	„ „ „ ...	0	15	11½
	<hr/>				<hr/>		
	£436	12	8		£2	1	9
	<hr/>				<hr/>		

Waterworks.—The whole of the district is supplied by the Newcastle and Gateshead Water Company, Hazelrigg and Wideopen being supplied direct and the remainder by meter. The consumption of water for domestic use in the several districts has been as follows:—

Dudley and Annitsford, 24,621,000 gallons;
average consumption per head per day, 13·93 gallons.

Seaton Burn and Wideopen, 16,641,000 gallons;
average consumption per head per day, 20·83 gallons.

Total for domestic purposes, 41,262,000 gallons.

The average consumption per head per day over the whole district was 16·08 gallons.

The total consumption of water for all purposes in the district was 42,193,000 gallons.

I am, Gentlemen,

Your Obedient Servant,

GLADSTONE BEATY,

A.R.S.I.

Council Chambers,
Dudley, Northumberland.

